

	APOLLO HOSPITALS,SECUNDERABAD	FMS– 02
		Issue: C
POLICY ON FACILITY MANAGEMENT AND SAFETY		Date: 05-01-2017
		Page 1 of 6
PREPARED BY: Hospital Administrator	APPROVED BY: Chief Executive Officer	

1.0 Purpose:

To provide a safe physical, medical, supportive facility for the staff, patients and visitors

2.0 Scope:

This shall include prevention and control of accidents which may cause injuries to humans and adversely affect safety of buildings/equipments. The policy shall also cater for security of property and those involved in handling emergencies and fire fighting.

3.0 Policies:

3.1 Safety Policy:

Apollo Hospitals, Secunderabad aims to provide a safe facility for all its occupants. This shall be accomplished by a Safety Committee, which shall oversee all aspects of Facility safety. The organization and responsibilities of the safety committee shall be stated and reports presented at the Quality Steering Committee. Maintenance Engineer's Office shall be responsible for the day-to-day management of facility safety. Responsibilities shall also include staff training.

	APOLLO HOSPITALS,SECUNDERABAD	FMS– 02
		Issue: C
POLICY ON FACILITY MANAGEMENT AND SAFETY		Date: 05-01-2017
		Page 2 of 6
PREPARED BY: Hospital Administrator	APPROVED BY: Chief Executive Officer	

A report shall be sent annually to the governing body on the effectiveness of the environment management program.

Maintenance staff shall be available round the clock for emergency repairs.

Response times shall be monitored from reporting to inspection and implementation of corrective actions.

3.2 Laws and regulations:

A list of all the local, national laws and regulations applicable to the hospital management facility shall be compiled and filed. The Administrator shall make sure that licenses and permissions are renewed from time to time, such as handling and disposal of waste, permission for potable water and sewerage, usage of electricity, usage of compressed gases etc.

3.3 Facility Inspection:

- Supervisors, as per the written schedules, shall inspect the facilities of the hospital and document the same

- There shall be preventive maintenance schedules for the facility. The findings of the inspection shall be brought to the notice of Chief Engineer. If there is any safety issue in the hospital, it shall be discussed with the safety committee members



APOLLO HOSPITALS,SECUNDERABAD

FMS– 02

Issue: C

POLICY ON FACILITY MANAGEMENT AND SAFETY

Date: 05-01-2017

Page 3 of 6

PREPARED BY:

Hospital Administrator

APPROVED BY:

Chief Executive Officer

- Checklist of safety issues shall be made and inspection shall carried out twice in a year in patient care areas and yearly once in non-patient care areas.

3.4 Hazardous Materials Handling:

- Lists of hazardous materials in the hospital shall be identified and prepared.
- The staff shall be educated about the handling and storage of these materials.
- The hazardous materials shall be stored in the designated areas earmarked for the same. The materials shall not be stored more than the prescribed amount at any place.
- The storage of hazardous materials shall be done according to the consumption pattern in that particular area.
- There shall be formulation of HAZMAT team to take care of hazardous materials spillage in the hospital. The possible hazards in the hospital shall be identified and inspected from time to time.
- There shall be a dedicated telephone number, to call the HAZMAT team in cases of spillage.



APOLLO HOSPITALS,SECUNDERABAD		FMS- 02
		Issue: C
POLICY ON FACILITY MANAGEMENT AND SAFETY		Date: 05-01-2017
		Page 4 of 6
PREPARED BY:	APPROVED BY:	
Hospital Administrator	Chief Executive Officer	

3.5 Community Emergencies:

- The Disaster Management Protocol shall address the subject.
- The materials department shall arrange for the supplies in cases of emergencies.
- The disaster management plan, which covers different aspects of the likely emergencies, shall be available in writing and approved by the Safety Committee.
- The policy document shall be available in Deputy Medical Superintendent's office, Emergency department and Administrator's office. The responsible people shall be well aware of such a policy.

3.6 Maintenance of Medical Equipment:

- All medical equipments shall be under preventive maintenance schedules either by In-house Biomedical Department or by Annual Maintenance Contract from outside agencies. Each equipment shall have a sticker that shows the next due date for maintenance and calibration.
- The user department shall do the daily quality checks for the equipment and the logbook for the same shall be maintained.
- The inventory of medical equipment shall be maintained in Biomedical Department.

	APOLLO HOSPITALS,SECUNDERABAD	FMS– 02
		Issue: C
POLICY ON FACILITY MANAGEMENT AND SAFETY		Date: 05-01-2017
		Page 5 of 6
PREPARED BY: Hospital Administrator	APPROVED BY: Chief Executive Officer	

3.7 Utility Management:

- The quality of drinking water shall be monitored by the Infection Control Committee as per the protocol. The utilities shall be available all the time in the hospital.
- For alternate sources of electricity, there shall be a generator available in the hospital.
- There shall be provision for safe drinking water along with alternate sources being identified in cases of emergencies.
- The water used in dialysis unit shall be tested for its composition and the documents for the same shall be available with the dialysis unit.

3.8 Staff Training:

- The department heads shall train their staff regarding their department procedures and protocols. In addition staff members should also be trained in fire safety issues, spillage of hazardous materials, etc. Staff shall be trained for their role in emergencies and such drills shall happen at least twice a year.

	APOLLO HOSPITALS,SECUNDERABAD	FMS– 02
		Issue: C
POLICY ON FACILITY MANAGEMENT AND SAFETY		Date: 05-01-2017
		Page 6 of 6
PREPARED BY: Hospital Administrator	APPROVED BY: Chief Executive Officer	

- The Material Safety Data Sheets shall be available with the concerned departments and they shall be knowledgeable enough about safe handling of materials.

- There shall be a safety education program going on continuously in the hospital. Every staff shall participate in it and the data shall be recorded.

3.9 Associated Documents:

- List of Hazardous materials
- Safety Manual
- Disaster Plan
- List Of Statutory Compliances
- Utility Plan
- HAZMAT plan
- Equipment management plan